

CLAIMS ONLY

SERIAL NO. _____ FILING DATE _____

APPLICANT(S) _____

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2		1				
3	1					
4	1					
5	1					
6		1				
7	1					
8	1					
9		1				
10		1				
11		1				
12		1				
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47						
48						
49						
50						
TOTAL IND.	3		↓		↓	
TOTAL DEP.	20		↔		↔	
TOTAL CLAIMS	93					

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS